Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: METHOD AND SYSTEM FOR IMPROVING

VISION

Attorney Docket Number:: 00206/100K244-US2

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 14

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David

Family Name:: Lieberman

City of Residence:: New York

State or Province of Residence:: NY

Country of Residence:: US

Street of mailing address:: 300 East 51st Street, Suite 18B

City of mailing address:: New York

State or Province of mailing address:: NY

Postal or Zip Code of mailing address:: 10022

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Jonathan

Family Name:: Grierson

City of Residence:: Atwater

State or Province of Residence:: OH

Country of Residence:: US

Street of mailing address:: 7120 Clark Road

City of mailing address:: Atwater

State or Province of mailing address:: OH

Postal or Zip Code of mailing address:: 44201

Correspondence Information

Correspondence Customer Number:: 0727

Representative Information

Representative Customer Number::

07278

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2003/0176 33	06/03/03
Application	An application	60/385,601	06/03/02
PCT/US2003/0176	claiming the benefit under 35 USC		.*
33	119(e)		
Application	An application	60/449,029	02/21/03
PCT/US2003/0176	claiming the benefit under 35 USC		
33	119(e)		

Foreign Priority Information

Assignee Information

Assignee name:: Scientific Optics, Inc.

Street of mailing address:: 300 East 51st Street, Suite 18B

City of mailing address:: New York

State or Province of mailing address:: NY

Postal or Zip Code of mailing address:: 10022